

ORIGINAL

30

"USUHS"

ADDRESS

BY
C. EVERETT KOOP, MD, ScD
SURGEON GENERAL
OF THE
U. S. PUBLIC HEALTH SERVICE
AND
DEPUTY ASSISTANT SECRETARY OF HEALTH
U. S. DEPARTMENT OF HEALTH AND HUMAN SERVICES



PRESENTED TO THE
UNIFORMED SERVICES UNIVERSITY OF THE HEALTH SCIENCES
BETHESDA, MARYLAND
MAY 20, 1987

(GREETINGS TO HOSTS, GUESTS, FRIENDS, ETC.)

I'M DELIGHTED TO JOIN YOU TODAY. YOU REPRESENT THE FUTURE OF MEDICINE IN THE UNIFORMED SERVICES...AND THE FUTURE HAS BEEN WEIGHING HEAVILY ON MY MIND IN RECENT WEEKS.

BUT FIRST, COL. LLEWELLYN ASKED ME TO DESCRIBE THE U.S. PUBLIC HEALTH SERVICE, AS I SEE IT, AND THEN TAKE YOUR QUESTIONS LATER ON.

I LIKED HIS PROPOSAL, BECAUSE I VENTURE TO SAY THAT, FOR MOST OF YOU, THE PUBLIC HEALTH SERVICE IS STILL PROBABLY SOMETHING OF A MYSTERY. SO, FOR THE NEXT FEW MINUTES I'M GOING TO SHARE WITH YOU MY VIEW OF THE ORGANIZATION I'M VERY PROUD OF AND WHOSE HIGHEST RANK I HAVE CARRIED FOR THE PAST 5½ YEARS.

FIRST OF ALL, WE'RE PART OF THE U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES. WE'RE HEADED UP BY A CABINET OFFICER WHO ALSO HAPPENS TO BE A FAMILY PHYSICIAN, DR. OTIS R. BOWEN.

THE DEPARTMENT HAS FOUR MAJOR OPERATING DIVISIONS: P.H.S., THE SOCIAL SECURITY ADMINISTRATION, THE OFFICE OF HUMAN DEVELOPMENT SERVICES, AND THE HEALTH CARE FINANCING ADMINISTRATION.

DR. ROBERT E. WINDOM IS THE ASSISTANT SECRETARY FOR HEALTH AND IS, THEREFORE, THE HEAD OF THE P.H.S. OPERATING DIVISION.

OF THE FOUR TOP JOBS IN THE DEPARTMENT, THREE OF THEM -- FOR THE FIRST TIME -- ARE NOW HELD BY LICENSED, PRACTICING PHYSICIANS: SECRETARY, ASSISTANT SECRETARY, AND SURGEON GENERAL.

THE FOURTH TOP POSITION -- THE JOB OF UNDER SECRETARY -- IS FILED BY MR. DON NEWMAN, A PHARMACIST. IT IS SAID THAT DR. BOWEN PICKED HIM FOR THE JOB BECAUSE ONLY DON COULD READ THE HANDWRITING OF THE OTHER THREE.

NOW, JUST WHAT IS THE U.S. PUBLIC HEALTH SERVICE. IN CRUDE TERMS IT IS AN ORGANIZATION WITH A BUDGET OF MORE THAN \$10 BILLION AND A WORK-FORCE OF 40,000 MEN AND WOMEN, CIVILIAN AND UNIFORMED, WORKING IN THIS COUNTRY AND OVERSEAS.

OF THAT TOTAL, 5,364 ARE OFFICERS IN UNIFORMED COMMISSIONED CORPS OF THE P.H.S., THE GROUP WHICH THE P.H.S. STUDENTS HERE WILL ONE DAY JOIN.

NOW, HOW IS THE P.H.S. ORGANIZED AND HOW DOES IT GET ITS MANY JOBS DONE?

I'LL SAY A FEW THINGS ABOUT HOW WE FUNCTION TODAY...HOW WE USED TO FUNCTION IN THE PAST...AND, FINALLY, I'LL MAKE A FEW GUESSES AS TO HOW WE MIGHT LOOK AND FUNCTION IN THE FUTURE.

FIRST, YOU OUGHT TO KNOW THAT THE "PUBLIC HEALTH SERVICE" IS NOT A SINGLE MONOLITHIC ORGANIZATION BUILT LIKE A PYRAMID WITH ONE BOSS AT THE TOP AND A LOT OF BUREAUS, DIVISIONS, AND BRANCHES DOWN AT THE BOTTOM.

THE P.H.S. IS PROBABLY BETTER CHARACTERIZED AS A KIND OF "FEDERATION" OF FIVE HIGHLY INDIVIDUAL AGENCIES...EACH WITH ITS SPECIAL SPHERE OF EXPERTISE, ITS OWN CONSTITUENCIES, AND ITS OWN RECORD OF SUCCESS ON BEHALF OF THE PUBLIC HEALTH OF THIS COUNTRY.

THERE IS ALSO AN OFFICE OF THE ASSISTANT SECRETARY FOR HEALTH, WHICH HAS A FEW SPECIAL RESEARCH AND MANAGEMENT FUNCTIONS, PLUS SEVERAL FEW SPECIAL PROJECTS THAT REQUIRE CLOSE MONITORING AT THE HIGHEST P.H.S. LEVEL.

NOW LET ME QUICKLY RUN THROUGH THE ORGANIZATION, STARTING WITH THE 5 MAJOR P.H.S. AGENCIES IN ALPHABETICAL ORDER.

I'LL BEGIN WITH THE ALCOHOL, DRUG ABUSE, AND MENTAL HEALTH ADMINISTRATION -- AFFECTIONATELY KNOWN AS "ADAMHA."

I THINK THE TITLE TELLS IT ALL. THIS AGENCY HAS THREE INSTITUTES -- OF MENTAL HEALTH, OF DRUG ABUSE, AND OF ALCOHOLISM AND ALCOHOL ABUSE.

"ADAMHA" CARRIES OUT RESEARCH AND PUBLIC EDUCATION PROGRAMS AND, THROUGH THE MECHANISM OF A HALF-BILLION-DOLLAR BLOCK GRANT, SUPPORTS A WIDE RANGE OF SERVICE DELIVERY PROGRAMS AT THE STATE AND LOCAL LEVEL. THESE INCLUDE ABOUT 800 MENTAL HEALTH CENTERS, 300 STATE AND LOCAL DRUG ABUSE PROGRAMS, AND ABOUT 1,000 LOCAL ALCOHOLISM PROJECTS ACROSS THE COUNTRY.

"ADAMHA" ALTOGETHER HAD \$1.3 BILLION TO WORK WITH IN THE CURRENT 1987 FISCAL YEAR. PART OF THAT WENT TO SPECIAL RESEARCH PROGRAMS, SUCH AS RESEARCH IN CO-FACTORS IMPLICATED IN THE SPREAD OF AIDS, AND A LARGE CHUNK HAS GONE INTO THE NATIONAL EFFORT AGAINST TEEN-AGE DRUG USE.

THE ADMINISTRATOR OF ADAMHA -- A FELLOW PEDIATRICIAN, BY THE WAY -- IS DR. DONALD IAN MACDONALD, WHO CURRENTLY WEARS THE EXTRA HAT OF HELPING TO DIRECT THE PRESIDENT'S AND MRS. REAGAN'S STEPPED-UP WAR ON DRUGS.

NEXT IN THE LIST ARE THE CENTERS FOR DISEASE CONTROL, OR C.D.C. THE CENTERS ARE HEADQUARTERED IN ATLANTA, GEORGIA.

AS THE NAME IMPLIES, THE CENTERS FOR DISEASE CONTROL ARE CONCERNED PRIMARILY -- BUT NOT EXCLUSIVELY -- WITH CONTROLLING OR PREVENTING COMMUNICABLE OR VECTOR-BORNE DISEASES.

C.D.C.'S MORTALITY AND MORBIDITY WEEKLY REPORT IS REGARDED AS THE BEST BAROMETER WE HAVE OF INFECTIOUS DISEASE ACTIVITY IN THIS COUNTRY. I HOPE YOU ARE ALL REGULAR READERS OF M.M.W.R. IF YOU AREN'T, START NOW. IT'S ONE OF THE FEW HABITS I CAN HONESTLY RECOMMEND.

C.D.C.'S TRADITION IS ROOTED IN THAT STRONG PUBLIC HEALTH FRATERNITY OF TROPICAL DISEASE SPECIALISTS WHO LABORED WITH WILLIAM CRAWFORD GORGAS AND WALTER REED IN THE JUNGLES OF THE CARIBBEAN, CENTRAL AMERICA, AND THE PHILIPPINES.

THEIR WORK SAVED THE LIVES OF MANY AMERICAN SOLDIERS WHO FOUGHT WORLD WAR II IN THE MALARIAL JUNGLES OF THE SOUTH PACIFIC. MORE RECENTLY, THEY DID WHAT HAD NEVER BEEN DONE BEFORE IN HUMAN HISTORY: AFTER A DECADE OF INTENSIVE INTERNATIONAL EFFORT, C.D.C. -- WORKING WITH HEALTH MINISTRIES OVERSEAS -- ELIMINATED A DISEASE: SMALLPOX.

THE ONLY SMALLPOX LEFT TODAY ARE SOME SAMPLE STRAINS -- MUSEUM PIECES, IF YOU WILL -- KEPT IN A SEALED VAULT IN C.D.C.'S ATLANTA HEADQUARTERS.

TODAY, THE CENTERS WORK PRIMARILY THROUGH STATE AND LOCAL HEALTH AUTHORITIES TO CARRY OUT SUCH ACTIVITIES AS...

CHILD IMMUNIZATIONS...

THE CONTROL OF SEXUALLY TRANSMITTED DISEASES, NOW INCLUDING AIDS...

AND THE MONITORING, TREATMENT, AND PREVENTION OF SUCH CHRONIC DISEASES AS HYPERTENSION AND RENAL DISEASE.

BUT C.D.C. IS PROBABLY BEST KNOWN FOR ITS EPIDEMIOLOGICAL DETECTIVE WORK, WHICH HELPED SOLVE SUCH MEDICAL MYSTERIES AS LEGIONNAIRE'S DISEASE AND TOXIC SHOCK SYNDROME AND IS NOW DEEP INTO THE PUZZLE OF AIDS. AND I'LL TALK ABOUT THAT IN A MOMENT.

THE C.D.C. BUDGET FOR THIS YEAR IS \$540 MILLION. THE PRESIDENT HAS ASKED CONGRESS TO GIVE C.D.C. \$553 MILLION NEXT YEAR.

THE NEXT P.H.S. AGENCY IS THE FOOD AND DRUG ADMINISTRATION...THE F.D.A.

FOR MOST OF ITS 80 YEARS, THE F.D.A. HAS BEEN ONE OF THE MOST WIDELY PUBLICIZED, DEEPLY RESPECTED...AND ROUNDLY HATED AGENCIES OF THE FEDERAL GOVERNMENT.

THE TWO WATCHWORDS OF F.D.A. LAW...SAFETY AND EFFICACY...MAKE THE F.D.A. THE ARBITER OF PUBLIC HEALTH IN THE MARKETPLACE OF HUMAN AND VETERINARY DRUGS, VACCINES, MEDICAL DEVICES, HEALTH SUPPLIES, RADIOLOGICAL GEAR, AND CERTAIN HEALTH AND MEDICAL PRACTICES, SUCH AS NUTRITION AND DIET COUNSELING, PRESCRIPTION DRUG ADVERTISING, DRUG PRESCRIBING, AND ANTENATAL FETAL DIAGNOSIS.

F.D.A. DOES ALL THIS IMPORTANT WORK WITH A STAFF OF 7,000 PEOPLE NATIONWIDE.

MOST RECENTLY THE F.D.A. WAS IN THE THICK OF THE PROBLEM OF FOOD AND DRUG TAMPERING, ENGAGED IN BY "MARKETPLACE TERRORISTS." THIS IS A FRIGHTENING DEVELOPMENT IN AMERICAN SOCIETY.

IT IS ALSO THE AGENCY THAT HAS REVISED ITS REGULATIONS TO SPEED UP THE PROCESS FOR MAKING DRUGS AVAILABLE TO PERSONS SUFFERING FROM A VARIETY OF AIDS-RELATED DISEASES. RIGHT NOW, THERE'S A.Z.T., OR AZIDOTHYIMIDINE. BUT OTHERS ARE IN THE PIPELINE.

THE F.D.A.'s BUDGET THIS YEAR TOTALLED \$450 MILLION. THE REQUEST FOR NEXT YEAR IS THE SAME. WITH THAT MONEY THE F.D.A. WILL REGULATE THE MOVEMENT OF BETTER THAN A HALF TRILLION DOLLARS WORTH OF FOODS, DRUGS AND BIOLOGICALS, COSMETICS, AND MEDICAL DEVICES IN AMERICAN COMMERCE.

NEXT IN ALPHABETICAL ORDER IS THE HEALTH RESOURCES AND SERVICES ADMINISTRATION, OR "HRSA." THIS AGENCY IS AN AMALGAM OF MANY DIFFERENT PROGRAMS WITH A TOTAL BUDGET OF ABOUT \$2 BILLION.

THE BIGGEST PROGRAM IN SIZE AND IMPACT IS RUN BY THE INDIAN HEALTH SERVICE. THIS \$900 MILLION EFFORT CARES FOR THE HEALTH NEEDS OF NEARLY 1 MILLION AMERICAN INDIANS AND ALASKA NATIVES THROUGH A FAR-FLUNG SYSTEM OF HOSPITALS, COMMUNITY HEALTH CENTERS, SMALL WALK-IN HEALTH STATIONS AND SATELLITE CLINICS, PLUS THE ADDITIONAL FACILITIES OF CONTRACT PROVIDERS OF HEALTH SERVICES.

THE PUBLIC HEALTH SERVICE GOT THIS ASSIGNMENT FROM THE CONGRESS 30 YEARS AGO. AT THAT TIME THE INFANT MORTALITY RATE AMONG INDIANS WAS 62.7 DEATHS PER 1,000 LIVE BIRTHS.

WE'VE SINCE BROUGHT THAT FIGURE DOWN TO A RATE TODAY OF LESS THAN 11 DEATHS PER 1,000 NEWBORNS...ALMOST WHAT IT IS FOR THE REST OF AMERICAN SOCIETY. AND WE WILL CERTAINLY HELP BRING THAT FIGURE DOWN EVEN MORE.

I'M PROUD OF EVERYONE IN THE U.S. PUBLIC HEALTH SERVICE. BUT I MUST CONFESS THAT I'M ESPECIALLY PROUD OF THE COMMISSIONED CORPS PHYSICIANS AND NURSES AND SANITARIANS WHO DELIVER QUALITY HEALTH CARE TO THE INDIAN PEOPLES EVEN UNDER THE MOST DIFFICULT CONDITIONS OF GEOGRAPHY AND WEATHER.

FOR MY PART, I INTEND TO DO WHATEVER I CAN TO GIVE THEM THE SUPPORT THEY NEED TO GET THAT JOB DONE. I HOPE THAT SOME OF YOU WILL CONSIDER AN ASSIGNMENT WITH THE I.H.S., AFTER YOU COMPLETE YOUR PROFESSIONAL TRAINING.

THE NEXT LARGEST PROGRAM IN H.R.S.A. IS IN SUPPORT OF MATERNAL AND CHILD HEALTH. THIS IS NOW A BLOCK GRANT TO THE STATES OF \$480 MILLION.

H.R.S.A. IS ALSO INVOLVED IN MANY OTHER ENTERPRISES, SUCH AS ORGAN TRANSPLANTATION...THE RESEARCH AND TREATMENT OF HANSEN'S DISEASE, OR LEPROSY...SUPPORT OF "BLACK LUNG" CLINICS...COMMUNITY HEALTH AND MIGRANT HEALTH CENTERS...AND CERTAIN SPECIAL NEEDS IN HEALTH PROFESSIONS EDUCATION, SUCH AS PROMOTING TRAINING IN FAMILY MEDICINE AND GERIATRIC MEDICINE.

H.R.S.A. IS ALSO THE HOME OF THE NATIONAL HEALTH SERVICE CORPS.

THE FIFTH P.H.S. AGENCY IS YOUR NEIGHBOR ACROSS THE STREET, THE NATIONAL INSTITUTES OF HEALTH. N.I.H. HAS THE LARGEST APPROPRIATION OF ALL THE P.H.S. AGENCIES: THIS YEAR ITS BUDGET TOTALLED \$6.2 BILLION.

THE 11 INSTITUTES WITHIN THE N.I.H., PLUS THE NEW NATIONAL CENTER FOR NURSING RESEARCH, SUPPORT 19,000 EXTRAMURAL RESEARCH PROJECTS, MOST OF THEM MULTI-YEAR AWARDS. THEY ALSO INCLUDE 5,600 NEW AWARDS MADE EACH YEAR.

IN ADDITION, N.I.H. CARRIES OUT SOME 2,000 INTRAMURAL PROJECTS EACH YEAR AND SUPPORTS THE RESEARCH TRAINING OF 9,000 OR SO PRE- AND POST-DOCTORAL CANDIDATES.

SINCE 1937, WHEN THE NATIONAL CANCER INSTITUTE WAS ESTABLISHED AND N.I.H. WAS "BORN," SO TO SPEAK, THIS EXTRAORDINARY ORGANIZATION HAS SUPPORTED RESEARCH IN BIRTH, DEATH, AND EVERY BIOMEDICAL CONDITION IN BETWEEN.

N.I.H. HAS ALSO SUPPORTED THE WORK OF MORE THAN 60 NOBEL LAUREATES IN MEDICINE, PHYSICS, AND CHEMISTRY...OR ABOUT 1 OUT OF EVERY 6 WINNERS IN THOSE PRIZE CATEGORIES.

IMAGINE IF YOU COULD PICK HORSES THE WAY N.I.H. PICKS RESEARCH SCIENTISTS. YOU'D BE A MILLIONAIRE MANY TIMES OVER.

THAT'S A BRIEF "SNAPSHOT" OF THE 5 MAJOR P.H.S. AGENCIES. BUT THERE IS YET A 6TH ORGANIZATIONAL UNIT, WHICH HAS BECOME MORE AND MORE IMPORTANT OVER THE PAST FEW YEARS. IT'S THE OFFICE OF THE ASSISTANT SECRETARY FOR HEALTH, OR "OASH" FOR SHORT.

WITHIN "OASH" ARE SUCH PROGRAM ACTIVITIES AS DISEASE PREVENTION AND HEALTH PROMOTION, ADOLESCENT PREGNANCY PREVENTION, INTERNATIONAL HEALTH, PHYSICAL FITNESS AND SPORTS MEDICINE, TWO "NATIONAL CENTERS," ONE FOR HEALTH STATISTICS AND THE OTHER FOR HEALTH SERVICES RESEARCH AND TECHNOLOGY ASSESSMENT, AN OFFICE FOR MINORITY HEALTH CONCERNS, AND MY OWN OFFICE OF THE SURGEON GENERAL.

THE "OASH" BUDGET THIS YEAR IS RUNNING AT A LEVEL OF \$350 MILLION. THAT FIGURE INCLUDES \$84 MILLION FOR RETIREMENT PAY AND MEDICAL BENEFITS FOR OFFICERS OF THE COMMISSIONED CORPS.

AS YOU KNOW, MOST MAJOR PROBLEMS IN PUBLIC HEALTH CUT ACROSS SPECIALTY LINES AND, WITH US, THEY CUT ACROSS ORGANIZATIONAL LINES. AND I GUESS THE BEST EXAMPLE OF THAT WOULD BE AIDS.

I WON'T GO INTO MY USUAL REMARKS ABOUT AIDS BECAUSE I'M POSITIVE YOU'VE BEEN FOLLOWING THE PROGRESS OF THIS DISEASE VERY CLOSELY.

SUFFICE IT TO SAY, HOWEVER, THAT "AIDS" IS JUST ABOUT THE TOUGHEST MEDICAL MYSTERY THE P.H.S. HAS EVER HAD TO SOLVE. BUT I HAVE FAITH THAT WE WILL SOLVE IT -- WITH THE CLOSE COOPERATION OF COLLEAGUES IN ACADEMIA AND CLINICAL RESEARCH HERE AND OVERSEAS. IT'S GOING TO TAKE TIME, BUT I BELIEVE WE'LL DO IT.

MEANWHILE, EVERY P.H.S. AGENCY HAS SOME ASSIGNMENT IN THIS BATTLE AGAINST WHAT IS POTENTIALLY ONE OF THE DEADLIEST DISEASES TO HAVE HIT THE HUMAN RACE IN SEVERAL CENTURIES.

A LITTLE OVER HALF OF THIS YEAR'S AIDS BUDGET OF \$416 IS BEING SPENT ON RESEARCH BY N.I.H.

C.D.C. IS WORKING WITH THE STATES AND GATHERING THE EPIDEMIOLOGICAL EVIDENCE OF THE DISEASE, AS WELL AS MOUNTING A HUNDRED-MILLION-DOLLAR PUBLIC EDUCATION PROGRAM.

ADAMHA HAS AN IMPORTANT PIECE OF THE RESEARCH PUZZLE, LOOKING AT THE RELATIONSHIP BETWEEN AIDS AND THE BEHAVIOR OF DRUG ABUSERS.

F.D.A., AS I MENTIONED, IS CONCERNED WITH DRUGS FOR AIDS-RELATED CONDITIONS AND FOR PROTECTING THE BLOOD SUPPLY FROM VIRAL CONTAMINATION.

H.R.S.A. IS CARRYING OUT A VARIETY OF DEMONSTRATION PROJECTS IN THE AREA OF PATIENT CARE, ESPECIALLY ALTERNATIVES TO THE CURRENT PRACTICE OF USING HIGH-COST ACUTE CARE HOSPITAL BEDS FOR AIDS PATIENTS. H.R.S.A. HAS \$12 MILLION FOR SUCH PROJECTS THIS YEAR.

AND FINALLY, "OASH" HAS A MILLION OR SO FOR INFORMATION, EDUCATION, AND COORDINATION OF NOT ONLY P.H.S. EFFORTS BUT ANTI-AIDS EFFORTS ACROSS THE SPECTRUM OF ALL FEDERAL AGENCIES.

THIS HAS BEEN, THEN, A GENERAL OUTLINE OF WHO WE ARE AND WHAT WE'VE DONE. NOW LET ME JUST TOUCH UPON A FEW POINTS RELATIVE TO THE FUTURE.

FIRST AND FOREMOST, THE COUNTRY NOW ACCEPTS THE FACT THAT THE MOST EFFECTIVE ROLE PLAYED BY THE FEDERAL GOVERNMENT IN MEDICINE AND HEALTH IS ITS ROLE AS THE PRINCIPLE SUPPORTER OF LONG-TERM, RESOURCE-INTENSIVE BIOMEDICAL AND BEHAVIORAL RESEARCH. HENCE, THE CENTER OF GRAVITY OF THE U.S. PUBLIC HEALTH SERVICE HAS SHIFTED QUITE DEFINITELY AWAY FROM SERVICES AND TOWARD RESEARCH.

THE SINGLE NOTEWORTHY EXCEPTION IS THE INDIAN HEALTH SERVICE. AND EVEN THERE, WE ARE MAKING SOME HEADWAY IN HELPING THE TRIBAL GOVERNMENTS ASSUME MORE AND MORE RESPONSIBILITY AND DECISION-MAKING ON THEIR OWN.

SECONDLY, WE ARE MODERATING THE PAST EMPHASIS ON CURATIVE AND REPARATIVE MEDICINE. IT'S SIMPLY NOT EFFECTIVE ENOUGH. WE CAN SAVE LIVES, LOWER MORBIDITY RATES, AND SAVE MILLIONS -- EVEN BILLIONS -- OF DOLLARS, IF WE PLACE MORE EMPHASIS ON THE PROMOTION OF GOOD HEALTH AND THE PREVENTION OF DISEASE AND DISABILITY.

AND, DESPITE THE ENORMOUS INVESTMENT WE'RE MAKING IN AIDS RESEARCH, IT'S EMINENTLY CLEAR THAT A CHANGE IN THE SEXUAL AND DRUG-TAKING BEHAVIOR OF A COUPLE OF MILLION AMERICANS AND THIS DREADFUL DISEASE WOULD GRADUALLY DISAPPEAR -- VACCINE OR NO VACCINE.

HENCE, WE'VE SET CERTAIN QUALITATIVE AND QUANTITATIVE GOALS FOR IMPROVING THE HEALTH STATUS OF AMERICANS. THEY ARE, HOWEVER, BASED UPON THE AMERICAN PEOPLE -- THEMSELVES -- ADOPTING BEHAVIORS THAT PREVENT DISEASE AND PROMOTE GOOD HEALTH.

WE HOPE, FOR EXAMPLE, TO...

...LOWER MORBIDITY AND MORTALITY OUTCOMES FROM SMOKING, FROM ALCOHOL AND DRUG ABUSE, AND FROM ACCIDENTS AT HOME, AT WORK, AND ON THE HIGHWAYS

...REDUCE THE DEATH RATES FROM HEART DISEASE CANCER, AND STROKE

...AND FURTHER REDUCE INFANT AND NEONATAL MORTALITY.

AS A RESULT OF THE THINGS WE'RE DOING TODAY, THE PUBLIC HEALTH SERVICE OF THE FUTURE WILL NOT ONLY BE RESEARCH- AND SCIENCE-ORIENTED, IT WILL ALSO BE HEAVILY ORIENTED TOWARD THE PROMOTION OF HEALTH AND THE PREVENTION OF DISEASE AND DISABILITY.

I THINK THE PUBLIC HEALTH SERVICE, WITH THIS KIND OF DIRECTION, IS EXERCISING MORE LEADERSHIP THAN EVER BEFORE IN ITS HISTORY. BUT IT'S DOING SO WITHOUT GOING AHEAD AND TAKING ON THE WHOLE JOB BY ITSELF.

THAT'S WHAT IT USED TO DO BECAUSE IT HAD TO. BUT THAT'S NO LONGER NECESSARY.

IN ADDITION, WE HAVE TENS OF THOUSANDS OF VERY WELL-INFORMED, HARD-DRIVING, AND COMMITTED PARTNERS IN LOCAL AND STATE GOVERNMENT AND IN THE PRIVATE SECTOR. TOGETHER, ALL OF US ARE MAKING MUCH MORE PROGRESS -- AND AT MUCH LESS COST -- THAN WE USED TO THINK WAS POSSIBLE.

AND THIS IS JUST THE BEGINNING.

IF I SOUND OPTIMISTIC ABOUT THE U.S. PUBLIC HEALTH SERVICE, IT'S BECAUSE I DEFINITELY AM. IF YOU LOOK JUST AT NUMBERS OF DOLLARS OR OF EMPLOYEES, YOU'LL MISS THE REAL EXCITEMENT OF WHAT THE P.H.S. IS GEARED UP TO DO TODAY...AND WILL CONTINUE TO DO WELL INTO THE FUTURE.

THE U.S. PUBLIC HEALTH SERVICE BEGAN AS A MODEST MARINE HOSPITAL SERVICE BACK IN 1798. WE'VE COME A GREAT DISTANCE IN BOTH TIME AND MISSION SINCE THOSE INNOCENT DAYS. BUT I BELIEVE THE BEST IS YET TO COME.

AND THE LATEST DEVELOPMENT, I BELIEVE, PREPARES US FOR THAT FUTURE.

I'M SPEAKING NOW OF THE PLAN OF "REVITALIZATION" WHICH I FORMALLY BEGAN ON APRIL 6 WITH AN ANNOUNCEMENT TO ALL MEMBERS OF THE COMMISSIONED CORPS.

THE PLAN HAS FIVE PARTS AND I'LL BE GLAD TO DISCUSS IT IN MORE DETAIL DURING THE QUESTION-AND-ANSWER PERIOD FOLLOWING THESE REMARKS. FOR NOW, HOWEVER, LET ME JUST SKETCH THEM OUT FOR YOU:

THE FIRST PART INVOLVES A REORGANIZATION IN WHICH, FINALLY, THE PERSONNEL POLICIES AND FUNCTIONS WILL BE CARRIED OUT DIRECTLY WITHIN THE OFFICE OF THE SURGEON GENERAL ITSELF AND NOT LOST WITHIN THE MUCH LARGER PERSONNEL SYSTEM OF THE CIVILIAN CIVIL SERVICE.

THE SECOND PART IS AN UPDATING AND A REVISION OF THE BILLET SYSTEM. THIS IS THE SYSTEM THAT MATCHES ASSIGNMENTS WITH GRADES, ASSURES THE MAINTENANCE OF RANK AND STRENGTH IN ESTABLISHED BILLETS, AND EMPHASIZES CAREER GROWTH.

THE THIRD PART OF THE REORGANIZATION CONCERNS CAREER DEVELOPMENT. THE RAPIDLY CHANGING HEALTH REQUIREMENTS OF THE AMERICAN PEOPLE DICTATE THAT WE PAY MORE ATTENTION TO TRAINING AND CAREER DEVELOPMENT WITHIN THE CORPS ITSELF. FOR THIS PURPOSE I WILL BE ESTABLISHING COMPETITIVE TRAINING BOARDS FOR ALL DISCIPLINES IN THE CORPS.

THE FOURTH PART CONCERNS THE MOBILITY OF THE CORPS. THROUGHOUT OUR HISTORY, THE AMERICAN PEOPLE HAVE NEEDED A WELL TRAINED, MOBILE PUBLIC HEALTH SERVICE, READY TO RESPOND TO ANY THREAT TO THE HEALTH STATUS OF OUR PEOPLE...ANYWHERE.

WE'VE LOST SOME OF THAT MOBILITY, SOME OF THAT FLEXIBILITY, AND SOME OF THAT READINESS. AND I WANT TO GET IT ALL BACK.

UNDER THE PROPOSED SYSTEM A P.H.S. OFFICER CAN ANTICIPATE FROM 3 TO 5 CAREER AND/OR GEOGRAPHIC ROTATIONS IN THE COURSE OF HIS OR HER 20-YEAR CAREER.

FINALLY, I'M CONCERNED ABOUT THE IMAGE OF THE P.H.S. COMMISSIONED CORPS. WE'RE A UNIFORMED SERVICE...YET WE'VE LOST OUR IDENTITY AS SUCH. I THINK WE NEED TO RE-CAPTURE THAT PRIDE OF SERVICE AND THAT IDENTIFICATION. WE ALSO NEED TO STRENGTHEN AND MAINTAIN THE HIGHEST STANDARDS OF PROFESSIONAL AND PERSONAL CONDUCT.

IF WE WANT TO ENJOY THE PRIDE OF LEADERSHIP AND THE PERQUISITES THAT GO ALONG WITH LEADERSHIP...THEN FOR HEAVEN'S SAKE LET'S ACT IN EVERY WAY TO DESERVE THEM.

NOW, IN ORDER TO GIVE YOU A CHANCE TO VENTILATE SOME OF THE CONCERNS OF YOUR OWN...OR TO GET SOME CLARIFICATION OF SOMETHING I'VE SAID...I THINK I'LL STOP RIGHT HERE AND TAKE YOUR QUESTIONS.

THANK YOU.

#